

Exhibit 156

Patient Daily Functioning Checklist Inquiry at North Texas State Hospital, Vernon Campus

Report Date: 09/13/2004

Page 61 of 253

North Texas State Hospital
Wichita Falls/Vernon, TX

PATIENT DAILY FUNCTIONING CHECKLIST Inqu

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): CIESIELSKI JOAN
Data Entry Date: 07/03/2004

GENERAL INFORMATION

Assessment Date: 07/03/2004

Assessment Time: 02:10 PM

Draft/Final: Final

Assessing Clinician: CIESIELSKI, JOAN F (001427)

Client DOB: [REDACTED]

Client SS#: [REDACTED]

Primary Language: ENGLISH

Is the preferred language English: Yes

LEVEL OF OBSERVATION/MONITORING

Precaution Type: Self Abuse

Level of Monitoring: Q 15 Minute Check

Level Implemented: 24 Hours

Observation Comments:

PT REMAINS ON CAT; I&I FOR PREVENTION OF SELF HARM, PT HAS BEEN SLEEPING 85% OF TIME EXCEPT FOR EATING. PT HAS BEEN CALM AND COOPERATIVE, PT DID STATE "DR. BLACK KEEPS ASKING ME THE SAME QUESTION OVER AND OVER, I THINK HE IS QUESTION MY FAITH. I TOLD HIM I WOULD ALWAYS FOLLOW GOD NO MATTER WHAT. HIS JUST A MAN, WHO IS HE TO QUESTION MY FAITH." PT DID APPEAR TO AGGIATED AT THIS TIME BUT CALM HIMSELF DOWN. HE ATE 100% OF HIS MEALS. PT MITTENS CHECK FOR CIRCULAION AN D REPLACE.

9067

02412

Exhibit 157

**North Texas State Hospital,
Vernon Campus, Physician P.
Note**

Report Date: 09/13/2004

Page 16 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

GENERAL INFORMATION

Assessment Date: 07/07/2004
Assessment Time: 08:10 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH
Is the Preferred Language English: Yes

MEDICATIONS

Medication Comments:
Zyprexa 30 mg po q1800 hours

NOTE

Note:

Patient appears to be more alert; his head is up and his speech is audible. His thought processes appear to be organized and goal-directed. He reported, "I still hear voices--people that I know--like my family--my brother, my mom, my dad, and my cousins." "They tell me not to take my medicine but I take it anyway." After a pause, he stated, "My wife talks to me more than anybody else."
"She thinks that it's funny what I'm going through--she said that I would not be going through this if I hadn't done what I did."
When asked when the voices started, he replied, "Voices started when I was in county (jail)." He then added, "I had voices before but never this bad."

TIMA

8820

02165

AT008820

Report Date: 09/13/2004

Page 17 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

Reason For Continued Hospitalization: Medical Necessity

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 2

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 5

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 5

NEG SX: 3

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 5

Negative SX or Psychosis: 3

Other Symptoms (Scale: 0-10; 0=None, 10=Extreme)

ASSESSMENT

8821

02136

AT008821

Report Date: 09/13/2004

Page 18 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 5

Overall Clinical Response: 3 - Partial

PLAN

Lab Work Needed: Other

Specify Other Lab Work Needed: Zyprexa protocol

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue Zyprexa 30 mg po q1800h.
2. Consult to Eli Anderson, M.D. for proposed treatment with Zyprexa 40 mg/day for patient who has improved but who continues to have persistent positive symptoms.
3. Continue on-unit groups.
4. Continue Catagory I precautions and mitts on hands in attempt to prevent self-harm.

8822

02167

AT008822

Exhibit 158

**Referral/Consultation Inquiry
from North Texas State
Hospital, Vernon Campus**

Report Date: 09/13/2004

Page 1 of 2

North Texas State Hospital
Wichita Falls/Vernon, TX

REFERRAL/CONSULTATION Inquiry

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): ANDERSON ELI T
Data Entry Date: 07/07/2004

REFERRAL

Referring Clinician: BLACK, JOSEPH L (000035)

Referral Date: 07/07/2004

Date Due: 07/07/2004

CONSULTANT

Consulting Service: Other

Specify Other: STAFF PSYCHIATRIST

Internal Consultant: ANDERSON, ELI T (002362)

Reason for Referral:

MED CONSULT FOR PROPOSED TREATMENT WITH ZYPREXA 40MG/DAY FOR 21 Y/O BM
WHO HAS SHOWN SIGNIFICANT IMPROVEMENT BUT WHO STILL REPORTS PERSISTENT
AUDITORY HALLUCINATIONS.

GENERAL INFORMATION

Assessment Date: 07/07/2004

Assessment Time: 03:34 PM

Draft/Final: Final

Consultant: Eli T. Anderson, M.D.

Client DOB: [REDACTED]

Client SS#: [REDACTED]

Primary Language: ENGLISH

Is the preferred language English: Yes

FINDINGS

Findings/Diagnostic Impression:

Chart reviewed: symptom severity at 6 on 6/25/04, with some improvement by
7/2/04.

8512

01849

AT008509

Report Date: 09/13/2004

Page 2 of 2

North Texas State Hospital
Wichita Falls/Vernon, TX

REFERRAL/CONSULTATION Inquiry

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): ANDERSON ELI T
Data Entry Date: 07/07/2004

Referral on 7/7/04 reveals continuing auditory hallucinations. The patient is Substance-Induced Psychosis with delusions and hallucinations. He is status-post sedlf-enucleation of right eye, asw well as status-post self-inflicted stab wounds of chest. He presents incompetent to stand trial for charge of capital murder. Significant medical includes hypertension by history. AIMS 0. Lipid panel and glucose unremarkable on 6/24/04. I feel that the patient is in terrible psychic pain and psychotic, albeit with some benefit from up to 30mg of Zyprexa per day.

Recommendations:

He may benefit from up to 40mg of Zyprexa per day and so concur in tha recommendation.

Signature _____ Date _____

8513

01850

Exhibit 159

**Letter from Eduardo Padilla
and Dan Rios, Criminalists, to
Sgt. Tr. William A. Bennie
regarding results of analysis
of Andre Thomas's blood and
urine specimen**

TEXAS DEPARTMENT OF PUBLIC SAFETY



THOMAS A. DAVIS, JR.
DIRECTOR

DAVID McEATHRON
ASST. DIRECTOR

CRIME LABORATORY SERVICE MSG 0460
PO BOX 4143
AUSTIN, TEXAS 78765-4143
Voice 512-424-2105 Fax 512-424-2869

June 04, 2004



COMMISSION
COLLEEN McHUGH
CHAIRMAN

ROBERT B. HOLT
CARLOS H. CASCOS
COMMISSIONERS

SGT TR WILLIAM A BENNIE
TEXAS RANGERS
1413 TEXOMA PARKWAY
SHERMAN, TEXAS 75090

Laboratory Case Number

L-320483

Agency Case Number

RB200400187

Offense Date

03/27/04

Suspect(s)

THOMAS, ANDRE LEE DOB: [REDACTED]

Victim(s)

[REDACTED] (JUVENILE) (DEC) DOB: [REDACTED]

[REDACTED] (JUVENILE) (DEC) DOB: [REDACTED]

THOMAS, LAURA CHRISTINE (DEC) DOB:
11-07-83

Offense: Homicide

County of Offense: Grayson (091)

Evidence Submitted

On March 31, 2004 in person from William A. Bennie
Blood and Urine specimen from Andre Lee Thomas

Results of Analysis

Blood Drugs: Chlorpheniramine Detected (no quantitation performed)

Urine Drugs: 9-Carboxy-THC (A Marijuana Metabolite) Detected

We are currently not testing for THC in blood specimens.

Blood Urine Analysis: An enzymatic method (EMIT) was used to screen for five classes of drugs: amphetamines, barbiturates, benzodiazepines, cocaine and its metabolites, and opiates. Additionally, THC and its metabolites were screened in the urine. The detection cut off for most drugs of interest is 0.1 mg/L in blood and 0.3 mg/L in urine.

The evidence will be retained until notified of the disposition.

DPS 0123

Laboratory Case Number

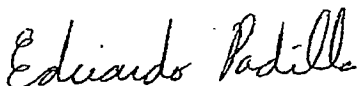
L-320483

Agency Case Number

RB200400187

Offense Date

03/27/04



Eduardo Padilla

Criminalist, Toxicology

Texas DPS Austin Laboratory



Dan Rios

Criminalist, Toxicology

Texas DPS Austin Laboratory

Exhibit 160

Clinic Staff Notes on Andre Thomas (Defendant's Exhibit 26)

CLINIC STAFF NOTES

INMATE NAME: Thomas Andre SO#: _____ DATE: 3/31/09

SUBJECTIVE: "Make me a Marine" - "I will save man from
 end" - "this is all a circle" - "What can I do to prove I'm
 ready to save everybody" -

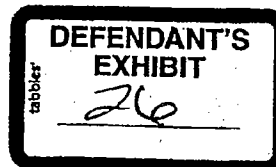
OBJECTIVE: I/M continues in delusional thinking. I/M denies
 any drug use prior to coming to jail. I/M's belligerence &
 wild gesturing is escalating. I/M Atty 'RJ Hagood' made
 sworn (by me) of situation. Atty Hagood stated he was
 attempting to get a court-ordered psychiatric/psychological
 evaluation ASAP -

ASSESSMENT: _____

PLAN: Per Dr Bell, continue to offer Zyprexa 10mg qd prn - if
 I/M is agreeable to I/M med, give Proton 20mg BID - Have
 Dr MS Park see I/M ASAP -

STAFF SIGNATURE: Dr. Bell N Sims Wn

PHYSICIAN SIGNATURE: [Signature]



00471

TR002947

Exhibit 161

**Physician's medication
prescription and notes of
Andre Thomas**

Physician's Orders
Use Ball Point Pen Only

ALLERGIES: Claritin - Rash

656 BHIS #:196949
Episode:2
THOMAS, Andre

BM F07164
06-23-04

DATE & TIME	ORDER:	JUSTIFICATION:
06/23/04 1508	1) Neurontin 500mg po BID pc (begin on 06/24/04)	✓
	2) Haloperidol 5mg po q 4h prn aggression, agitation altern. 2mg po q 4h prn attempted self-harm	✓
	Joseph Black M.D. faxed Noted Collette 06/23/04 @ 1600	
	6-24-04 @ 0140 SD @ 11:00 AM	
06/24/04 0629	1) Zyprexa 10mg po now 1st 10mg po q 12h today then beginning on 06/25/04 Zyprexa 20mg po q 12h	✓
	2) pt declines to take Zyprexa today, please give Zyprexa 10mg po q 12h	✓
	3) pt declines to take Zyprexa tomorrow either later, please give Zyprexa 10mg po q 12h 4 q 6h x 24 hrs; then after the 1st Zyprexa	✓
	Joseph Black M.D.	
	Noted 06/24/04 @ 0540 Mando W	

15404

Revised: 2/00
Approved/Reviewed by the Medical Records Committee: 6/92

MHRS 2-1.1
(Plain)

01715

AT015440

Exhibit 162

**Physician's Medical Summary
of Andre Thomas doubling
the medication dosage**

Report Date: 09/13/2004

Page 1 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): MENZIK CYNIA D
Data Entry Date: 06/24/2004

GENERAL INFORMATION

Assessment Date: 06/24/2004
Assessment Time: 10:00 AM
Draft/Final: Final
Assessing Clinician: MENZIK, CYNIA D (000340)
Local Case #: 656F07164
Primary Language: ENGLISH
Is the Preferred Language English: Yes

NOTE

Note:
ADMIT H&P COMPLETED. CWS DICTATED. CMENZIK, CFNP.

TIMA

Algorithm: None
SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)
OBJECTIVE FINDINGS (Physician Examination)
Clinical Rating Scales
Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)
Other Symptoms (Scale: 0-10; 0=None, 10=Extreme)
ASSESSMENT
0=None; 10=Extreme
PLAN

8805

02150

AT008805

Report Date: 09/13/2004

Page 2 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): MENZIK CYNIA D
Data Entry Date: 06/24/2004

8806

02151

AT008806

Report Date: 09/13/2004

Page 3 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/24/2004

GENERAL INFORMATION

Assessment Date: 06/24/2004
Assessment Time: 08:27 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH

MEDICATIONS

Medication Comments:
Depakote 500 mg po BID pc (begun today)

NOTE

Note:
21 y/o BM admitted 06/23/04 did not sleep any last night. He stated that "the voices in my head keep me awake". He reported voices as being "voice of girl in the burning car" and "the voice of Allah". Patient continued to avoid eye contact and to talk in mostly inaudible volume.

TIMA

Reason For Continued Hospitalization: Medical Necessity
Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition
Barrier To Discharge: Forensic Commitment
Algorithm: Bipolar Disorder - Manic (BD-M)
TIMA Stage: 1

8807

02152

AT008807

Report Date: 09/13/2004

Page 4 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/24/2004

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 6
Side Effects: 0
Side Effect Types: None
Appetite: Poor
Sleep: Poor

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 6
NEG SX: 4

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0
Depression: 0
Positive SX or Psychosis: 6
Negative SX or Psychosis: 4

Other Symptoms (Scale: 0-10; 0=None, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0
Overall Functionality: 1
Overall Clinical Response: 1 - None

8808

02153

AT008808

Report Date: 09/13/2004

Page 5 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/24/2004

PLAN

Lab Work Needed: Other

Specify Other Lab Work Needed: Depakote protocol

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: Yes

Plan Comments:
Begin Zyprexa 20 mg po q1800h

8809

02154

AT008809

Report Date: 09/13/2004

Page 6 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/30/2004

GENERAL INFORMATION

Assessment Date: 06/25/2004
Assessment Time: 08:25 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH
Is the Preferred Language English: Yes

MEDICATIONS

Medication Comments:
Zyprexa 20 mg po q1800 hours

NOTE

Note:
This 21 year old black male, admitted 06-23-04, reported yesterday that he had not slept any the previous night because of the voices in his head keeping him awake. The patient received Zyprexa 20 mg yesterday. today he reported that he has not heard voices yet this morning. He reported that he slept last night. He appears more alert and more able to talk. He is able to make better eye contact, although he still has a tendency to duck his head. He was able to talk some about the events leading up to his arrest.

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

8810

02155

AT008810

Report Date: 09/13/2004

Page 7 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/30/2004

TIMA Stage: 1

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 6

Side Effects: 0

Side Effect Types: None

Appetite: Fair

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 5

NEG SX: 4

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 5

Negative SX or Psychosis: 4

Other Symptoms (Scale: 0-10; 0=None, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 2

8811

02156

AT008811

Report Date: 09/13/2004

Page 8 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/30/2004

Overall Clinical Response: 2 - Minimal

PLAN

Lab Work Needed: Other

Specify Other Lab Work Needed: Continue Depakote protocol

Deviation From Medication Algorithm Recommended: No

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue Zyprexa 20 mg po q1800h
2. Patient being enrolled in on-unit groups including coping skills, stress and anger management and competency education and training groups. He shall also be evaluated for other psychosocial rehabilitation therapy programs.

The patient is being interviewed today by Dr. Richard Rogers of the University of North Texas by court order.

Although the patient reported that he does not wish to enucleate his left eye, at this time we are going to continue the mittens until we develop a better understanding of the patient and his psychopathology.

8812

02157

AT008812

Report Date: 09/13/2004

Page 9 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 06/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/30/2004

GENERAL INFORMATION

Assessment Date: 06/30/2004
Assessment Time: 08:15 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH
Is the Preferred Language English: Yes

MEDICATIONS

Medication Comments:
Zyprexa 20 mg po q1800 hours

NOTE

Note:
Patient told staff that he didn't know why he was in jail because he "did them a favor by killing the demons". This a.m. patient said that he was in jail because "I killed three people". He then said that he didn't know why it was considered wrong "since I was doing the will of God". He said that he would enucleate his remaining left eye if he thought that it was God's will.

TIMA

Reason For Continued Hospitalization: Medical Necessity
Psychiatric Hospital Services Medically Necessary Because: Treatment Can

8813

02158

AT008813

Report Date: 09/13/2004

Page 10 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/30/2004

Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 1

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 6

Side Effects: 0

Side Effect Types: None

Appetite: Fair

Sleep: Fair

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 5

NEG SX: 4

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 5

Negative SX or Psychosis: 4

Other Symptoms (Scale: 0-10; 0=none, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

8814

02159

AT008814

Report Date: 09/13/2004

Page 11 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 06/30/2004

Overall Functionality: 5

Overall Clinical Response: 3 - Partial

PLAN

Lab Work Needed: Other

Specify Other Lab Work Needed: Continue Depakote protocol

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Increase Zyprexa to 30 mg po q1600h.
2. Continue current groups.
3. Continue Category I precautions and mitts in attempt to prevent self-harm.

8815

02150

AT008815

Report Date: 09/13/2004

Page 12 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

GENERAL INFORMATION

Assessment Date: 07/02/2004
Assessment Time: 10:10 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH

MEDICATIONS

Medication Comments:
Zyprexa 30 mg po q1800 hours
Depakote 500 mg po bid pc

Serum Valproate of 06-24-04 was 21.0.

NOTE

Note:

The patient has been fairly cooperative with staff and unit rules. He does not appear to be exhibiting mood symptoms or mood swings at this time. The patient has continued on Category I precautions with mitts on his hands in an attempt to prevent self-harm.

The patient restated his belief that if he believed God told him to enucleate his left eye, he would do so; however, he stated, "I don't think God would tell me to do that."

The patient stated that he had received the message from God by just his having an understanding of what God wanted him to do in his mind. When he was asked if he was a prophet of God, the patient stated, "I don't think

8816

02161

AT008816

Report Date: 09/13/2004

Page 13 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

so."

The patient was able to keep his head up better today than on previous interviews. He was able to speak a little more plainly; however, he still slipped back several times into ducking his head and talking in a low, inaudible voice.

The staff reported the patient had a rash on his back. Examination of the patient did reveal what appeared to be a maculopapular dark eruption over his back; however, he did not have it on his chest or limbs.

He was agreeable with discontinuance of the Depakote.

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 2

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 6

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 5

8817

02169

AT008817

Report Date: 09/13/2004

Page 14 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

NEG SX: 4

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 5

Negative SX or Psychosis: 4

Other Symptoms (Scale: 0-10; 0=None, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 4

Overall Clinical Response: 3 - Partial

PLAN

Lab Work Needed: Other

Specify Other Lab Work Needed: Zyprexa protocol

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: Yes

Plan Comments:

Return to Stage I after discontinuing the Depakote.

8818

02163

AT008818

Report Date: 09/13/2004

Page 15 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

1. Continue Zyprexa 30 mg po q1800h.
2. Discontinue the Depakote.
3. Continue on-unit groups.
4. Continue Category I precautions and mitts on hands in attempt to prevent self-harm.

8819

02161

AT008819

Report Date: 09/13/2004

Page 16 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

GENERAL INFORMATION

Assessment Date: 07/07/2004
Assessment Time: 08:10 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH
Is the Preferred Language English: Yes

MEDICATIONS

Medication Comments:
Zyprexa 30 mg po q1800 hours

NOTE

Note:

Patient appears to be more alert; his head is up and his speech is audible. His thought processes appear to be organized and goal-directed. He reported, "I still hear voices--people that I know--like my family--my brother, my mom, my dad, and my cousins." "They tell me not to take my medicine but I take it anyway." After a pause, he stated, "My wife talks to me more than anybody else."
"She thinks that it's funny what I'm going through--she said that I would not be going through this if I hadn't done what I did."
When asked when the voices started, he replied, "Voices started when I was in county (jail)." He then added, "I had voices before but never this bad."

TIMA

8820

02165

AT008820

Report Date: 09/13/2004

Page 17 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 06/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

Reason For Continued Hospitalization: Medical Necessity

Psychiatric Hospital Services Medically Necessary Because: Treatment Can
Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 2

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 5

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 5

NEG SX: 3

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 5

Negative SX or Psychosis: 3

Other Symptoms (Scale: 0-10; 0=none, 10=Extreme)

ASSESSMENT

8821

02156

AT008821

Report Date: 09/13/2004

Page 18 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/07/2004

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 5

Overall Clinical Response: 3 - Partial

PLAN

Lab Work Needed: Other

Specify Other Lab Work Needed: Zyprexa protocol

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue Zyprexa 30 mg po q1800h.
2. Consult to Eli Anderson, M.D. for proposed treatment with Zyprexa 40 mg/day for patient who has improved but who continues to have persistent positive symptoms.
3. Continue on-unit groups.
4. Continue Catagory I precautions and mitts on hands in attempt to prevent self-harm.

8822

02167

AT008822

Report Date: 09/13/2004

Page 19 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/13/2004

GENERAL INFORMATION

Assessment Date: 07/09/2004
Assessment Time: 09:32 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (300035)
Local Case #: 656F07164
Primary Language: ENGLISH

MEDICATIONS

Medication Comments:
Zyprexa 40 mg po q1800 hours

NOTE

Note:

The patient reported that he still thought he would enucleate his left eye if God told him to do so. He stated, "When you asked me if I would do that, you were essentially asking me if I believed in God." The patient also made statements about being talked to by the Dali Lama.

The patient denied having desire to harm himself at this time.

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 1

8523

02138

AT008823

Report Date: 09/13/2004

Page 20 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/13/2004

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 5

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 3

NEG SX: 3

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 3

Negative SX or Psychosis: 3

Other Symptoms (Scale: 0-10; 0=none, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 5

Overall Clinical Response: 3 - Partial

PLAN

8824

02139

AT008824

Report Date: 09/13/2004

Page 21 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/13/2004

Lab Work Needed: None

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue Zyprexa 40 mg po q1800h.
2. Continue Category I and mitts in attempts to prevent self-harm.
3. Patient encouraged to work on his competency issues.

8825

02170

AT008825

Report Date: 09/13/2004

Page 22 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/26/2004

GENERAL INFORMATION

Assessment Date: 07/16/2004
Assessment Time: 09:34 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH
Is the Preferred Language English: Yes

MEDICATIONS

Medication Comments:
Zyprexa 40 mg po q1800 hours

NOTE

Note:

The patient walked into the room, had his head up, and spoke in a much more confident and affirmative manner than previously. He stated, "I want to hurry up and get back to county to face my charges." When he was asked what he would do if God told him to harm himself, he stated that he would harm himself under those circumstances; however, he also said, "God isn't going to ask me to do that."

The patient has apparently done well in competency group.

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition.

Algorithm: Bipolar Disorder - Manic (ED-M)

8826

02171

AT008826

Report Date: 09/13/2004

Page 23 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 06/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/26/2004

TIMA Stage: 1

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 4

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 2

NEG SX: 0

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 2

Negative SX or Psychosis: 0

Other Symptoms (Scale: 0-10; 0=none, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 8

8827

02172

AT008827

Report Date: 09/13/2004

Page 24 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 07/26/2004

Overall Clinical Response: 3 - Partial

PLAN

Lab Work Needed: None

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue current medication
2. Continue Category I and mits in attempts to prevent self-harm.
3. Patient encouraged to continue work on his competency issues.
4. He was referred for his oral competency evaluation.

8828

02173

AT008828

Report Date: 09/13/2004

Page 25 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 06/09/2004
Data Entry By (Login): MENZIK CYNIA D
Data Entry Date: 07/23/2004

GENERAL INFORMATION

Assessment Date: 07/23/2004
Assessment Time: 12:06 PM
Draft/Final: Final
Assessing Clinician: MENZIK, CYNIA D (000340)
Local Case #: 656F07164
Primary Language: ENGLISH
Is the Preferred Language English: Yes

MEDICATIONS

Medication Comments:
Zyprexa 40 mg po q1800 hours

NOTE

Note:
F/U OF ELEVATED LFTs. PATIENT IS HIV AND HEPATITIS NEG. AST=100 AND ALT=217. ALK PHOS=76. PATIENT IS ON ZYPREXA. DENIES N/V/D, DOES REPORT A VAGUE, GENERALIZED UPPER ABD DISCOMFORT FROM LEFT TO RIGHT SIDE. NO CONSTIPATION, NO PEDAL EDEMA. NO OTHER SX. EX: UNREMARKABLE ABD EXAM, NONTENDER AND NO HSM, BS+, NO RIGIDITY, NO REBOUND, NO GUARDING. DOES HAVE SEV. OLD SCARS TO ABD. AREA FROM PAST SELF-INFLICTED KNIFE WOUNDS WITH RELATED SURGICAL REPAIR. A: ELEVATED LFTs WITHOUT ACCOMPANYING PHYSICAL PROBLEMS. P: WILL SERIAL MONITOR LABS AND PATIENT WILL REPORT AND RETURN TO SICKCALL IF ANY REVIEWED SX APPEAR. CMENZIK, CFNP.

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition

8829

02174

AT008829

Report Date: 09/13/2004

Page 26 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196849
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): MENZIK CYNIA D
Data Entry Date: 07/23/2004

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 1

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 4

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 2

NEG SX: 0

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 2

Negative SX or Psychosis: 0

Other Symptoms (Scale: 0-10; 0=none, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

8830

02175

AT008830

Report Date: 09/13/2004

Page 27 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): MENZIK CYNIA D
Data Entry Date: 07/23/2004

Overall Functionality: 8

Overall Clinical Response: 3 - Partial

PLAN

Lab Work Needed: None

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue current medication
2. Continue Category I and mits in attempts to prevent self-harm.
3. Patient encouraged to continue work on his competency issues.
4. He was referred for his oral competency evaluation.

8831

02176

AT008831

Report Date: 09/13/2004

Page 28 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): TURNER KIRBY V
Data Entry Date: 07/29/2004

GENERAL INFORMATION

Assessment Date: 07/23/2004
Assessment Time: 10:50 AM
Draft/Final: Final
Assessing Clinician: TURNER, KIRBY (002464)
Local Case #: 656F07164
Primary Language: ENGLISH

MEDICATIONS

Medication Comments:
Zyprexa 40 mg po q1800 hours

NOTE

Note:
Patient has made mild improvement. Continues on category I but has made no spontaneous effort of self-harm.

Patient states auditory hallucinations are decreasing with medication. He denies any major drug side effects.

The patient remains psychotic but is improving. Continue with prevention of self-harm.

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 1

8832

02177

AT008832

Report Date: 09/13/2004

Page 29 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): TURNER KIRBY V
Data Entry Date: 07/29/2004

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 4
Side Effects: 0
Side Effect Types: None
Appetite: Good
Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 2
NEG SX: 0

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0
Depression: 0
Positive SX or Psychosis: 2
Negative SX or Psychosis: 0

Other Symptoms (Scale: 0-10; 0=none, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0
Overall Functionality: 8
Overall Clinical Response: 3 - Partial

8833

02178

AT008833

Report Date: 09/13/2004

Page 30 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): TURNER KIRBY V
Data Entry Date: 07/29/2004

PLAN

Lab Work Needed: None

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue current medication
2. Continue Category I and mitts in attempts to prevent self-harm.
3. Patient encouraged to continue work on his competency issues.
4. He was referred for his oral competency evaluation.

8835

02179

AT008834

Report Date: 09/13/2004

Page 31 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 08/03/2004

GENERAL INFORMATION

Assessment Date: 07/30/2004
Assessment Time: 09:11 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH

MEDICATIONS

Medication Comments:
Zyprexa 40 mg po q1800 hours

NOTE

Note:
The patient passed his oral competency evaluation earlier this week.

However, the patient also scored heavily on the SIRS, indicating a high probability of malingering.

The patient reported today that "voices" still occur to him, but are less frequent than previously. He said the "voices" tell him to "shut up" or "don't wake up." His affect was calm and rather blunted. He was unable to report a way of decreasing the auditory hallucinations which he reported.

The patient has been asking several staff members about his report having been sent out in an attempt to find out when he is scheduled to leave. We have asked that staff not tell him of his scheduled date when such is established.

8834

02130

AT008835

Report Date: 09/13/2004

Page 32 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 08/03/2004

D: 07-30-04/JB
R: 07-30-04 @ 4:55 PM by hand
T: 08-02-04/ce (Steno)

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can
Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

TIMA Stage: 1

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 1

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 1

NEG SX: 0

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 1

8836

02181

AT008836

Report Date: 09/13/2004

Page 33 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 08/03/2004

Negative SX or Psychosis: 0

Other Symptoms (Scale: 0-10; 0=None, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 9

Overall Clinical Response: 4 - Full

PLAN

Lab Work Needed: None

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue current medications and groups.
2. Continue Category I and mitts in attempts to prevent self-harm.
3. Patient has been found competent to stand trial and is awaiting return to his committing court.

8837

02182

AT008837

Page 34 of 36

Report Date: 09/13/2004

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 08/12/2004

GENERAL INFORMATION

Assessment Date: 08/06/2004
Assessment Time: 08:48 AM
Draft/Final: Final
Assessing Clinician: BLACK, JOSEPH L (000035)
Local Case #: 656F07164
Primary Language: ENGLISH

MEDICATIONS

Medication Comments:
Zyprexa 40 mg po q1800 hours

NOTE

Note:
Patient stated that he still hears voices "if I listen real hard for them." He stated that the voices are inside his head. He stated that he most frequently recently has been hearing his brother's voice telling him to kill himself. The patient reported that he is sleeping better at night.

D: 08-06-04/JB
R: 08-11-04 @ 1:55 PM/hand
T: 08-11-04/ce (Steno-V)

TIMA

Psychiatric Hospital Services Medically Necessary Because: Treatment Can Improve Patient Condition

Algorithm: Bipolar Disorder - Manic (BD-M)

8838

02183

AT008838

Report Date: 09/13/2004

Page 35 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 08/12/2004

TIMA Stage: 1

SUBJECTIVE FINDINGS (Patient Self-Report: 0=None, 10=Extreme)

Symptom Severity: 1

Side Effects: 0

Side Effect Types: None

Appetite: Good

Sleep: Good

OBJECTIVE FINDINGS (Physician Examination)

Clinical Rating Scales

POS SX: 1

NEG SX: 0

Core Symptoms (Scale: 0-10, 0=None, 10=Extreme)

Mania: 0

Depression: 0

Positive SX or Psychosis: 1

Negative SX or Psychosis: 0

Other Symptoms (Scale: 0-10; 0=none, 10=Extreme)

ASSESSMENT

0=None; 10=Extreme

Overall Side Effect: 0

Overall Functionality: 9

Overall Clinical Response: 4 - Full

8839

02134

AT008839

Report Date: 09/13/2004

Page 36 of 36

North Texas State Hospital
Wichita Falls/Vernon, TX

PHYSICIAN P. NOTE

CLIENT NAME: THOMAS, ANDRE LEE
CLIENT ID: 000196949
DATE OF BIRTH: [REDACTED]
Episode Number: 2

Episode Start Date: 06/23/2004
Episode End Date: 08/09/2004
Data Entry By (Login): BLACK JOSEPH L
Data Entry Date: 08/12/2004

PLAN

Lab Work Needed: None

Deviation From Medication Algorithm Recommended: No

Rationale for Changing Medication and/or Dose: Insufficient Improvement

Change in Diagnosis: No

Change in Algorithm: No

Change in Stage: No

Plan Comments:

1. Continue current medications and groups.
2. Continue Category I and mits in attempts to prevent self-harm.
3. Patient has been found competent to stand trial and is awaiting return to his committing court.

8840

02185

AT008840

Exhibit 163

Discharge Summary

Discharge/Furlough Summary

To be completed by the physician within ten (10) calendar days of the patient's discharge, or furlough with intent to discharge.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

FORMAT**1. CONDITION OF PATIENT ON ADMISSION:**

- a. Reason for admission
- b. Brief description of Admission mental status
- c. Presumptive Diagnosis

2. SIGNIFICANT PHYSICAL FINDINGS:**3. COURSE & PROGRESS:**

(For each identified problem; also include medication course, as appropriate.)

4. CONDITION OF PATIENT AT DISCHARGE:

- a. Reason for discharge
- b. Comparative description

5. INSTRUCTIONS GIVEN TO PATIENT:

- a. Physical activity level
- b. Medication/diet
- c. Follow-up care
- d. Patient destination
- e. Referral Agency

6. FINAL DIAGNOSES:

- All Axis I
- All Axis II
- All Axis III

7. SIGNATURE & DATE:

DATE OF DICTATION: 08-05-04

DATE OF DISCHARGE: 08-09-04

CONDITION OF PATIENT ON ADMISSION: The Psychiatric Evaluation dictated by Joseph Black, M.D. on 06-23-04 provided the following information:

INFORMANTS: The patient appeared to be a poor historian.

Sources of information for this report include the patient's own statements, my clinical observations, the clinical observations of other staff members and limited collateral records. The collateral records available for this evaluation include but are not limited to copies of the listed informants.

1. Preliminary Social Assessment from the Admissions Department of North Texas State Hospital-Vernon Maximum Security Unit.
2. Sherman Police Department incident report for incident #0402024.
3. True Bill of Indictment for Cause #51483.
4. Competency to Stand Trial evaluation report by James R. Harrison, Ph.D., dated 04-15-04.
5. Evaluation of Competency to Stand Trial report by Peter Oropeza, Psy.D., dated 04-26-04.
6. Transcript of Hearing about Competency for Trial Court Cause #51483, in the 15th District Court of Grayson County, Texas, on 06-16-04.
7. Amended Order of Criminal Commitment Because of Incompetency for Cause #50391.
8. North Texas State Hospital - Vernon Maximum Security Unit questionnaire (undated).
9. Amended Order of Criminal Commitment Because of Incompetency for Cause #51483, which indicates that Mr. Thomas has been found Incompetent to Stand Trial for another charge of Capital Murder.

This evaluation was conducted without the aid of FBI records, other prior medical records, or other police reports.

MEDICATIONS: The North Texas State Hospital - Vernon Maximum Security Unit questionnaire indicated that at the time of his transport to this facility the patient had been prescribed the following medications:

1. Geodon 160 mg po qhs
2. Depakote 500 mg po qAM
3. Ibuprofen 600 mg po q 4-6 hrs prn

**8523**

MHRS 4-8

01860

AT008520

Continuation Form

Dated: 08-05-04

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

In response to the question "Does inmate refuse medicine, and if so, how often?", the response on the questionnaire was "to two weeks."

CHIEF COMPLAINT: This 21 year old, widowed black male from Sherman, Texas, was admitted to North Texas State Hospital - Vernon Maximum Security Unit on 06-23-04, pursuant to Article 46B.073 of the Code of Criminal Procedure after having been found incompetent to stand trial for charge of Capital Murder, out of the 15th District Court of Grayson County, Texas.

The patient was committed to this facility for the specific purpose of treatment toward the goal of gaining competency to stand trial.

The patient's primary language is English, and an interpreter was not needed.

I informed the patient of the purpose of this evaluation, of the purpose of this hospitalization, of the limited degree of confidentiality at this facility, of a report being prepared for the court, his attorney and the prosecuting attorney, and of the possibility that I may be required to testify at a hearing. The patient indicated that he understood my explanations.

The patient was interviewed in the presence of security staff.

When the patient was asked what events brought him to this facility, he responded, "They're trying to dope me up."

HISTORY OF PRESENT ILLNESS: The Sherman Police Department incident report for incident #0402024 provided the following information:

"Offense Narrative: 03-27-04, 10:24, Dawsey 132 164:

"On 03-27-04 at approximately 0723 hours, I was in the briefing room at the Sherman Police Department when Sgt. Mullins received a call from dispatch in regards to a possible triple homicide located at 1200 West Taylor, Apt. #340. Sgt. Mullins directed myself, Officer Miller and Officer Ferguson to the scene. We arrived at the location at approximately 0725 hours. I arrived with Sgt. Mullins at the location. We went immediately to the apartment, which was #340. Upon walking up to the front door of the apartment, I observed that the door was not completely closed and appeared to have been forced open and the door frame appeared to be cracked. Sgt. Mullins pushed open the door and announced that we were the Sherman Police Department. We made entry into the apartment to check for victims and/or suspect in what is known as a protective sweep. Upon entering the apartment I observed a white female lying on her back near the breakfast area at the front of the hallway. The white female, later identified as Laura Christen Thomas, was nude with a large open chest wound in her chest area. I maintained my position there covering the kitchen area and hallway and Sgt. Mullins checked the back bedrooms of the apartment.

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 2 of 13

8524

Core Form: ☐ Yes ☐ NoContinuation of MHRS 4-8
MHRS-cf

01861

AT008521

Continuation Form

Dated: 08-05-04

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

"Sgt. Mullins notified me that the back area of the apartment was clear and that two other victims were located in the bedrooms off of the hallway. Upon completing the protective sweep, myself and Sgt. Mullins exited the apartment and secured the area with crime scene tape to ensure that no one disturbed the crime scene area. After securing the area with crime scene tape, I began a crime scene log at the direction of Sgt. Mullins, on a piece of notebook paper. After receiving an official crime scene log, the information was transferred from notebook paper to the actual crime scene log.

"I was relieved from my duties of keeping up with the crime scene log by Reserve Officer Tony Leone at approximately 0959 hours.

"The notebook on which I had originally started the crime scene log was turned over to Officer Log to be tagged with the official crime scene log.

"While I was conducting the integrity of the crime scene by keeping up with the crime scene log, Officer Ferguson began canvassing the nearby apartments and speaking with residents, obtaining their names and phone numbers. Paul Borman, who was the reporting party and the father of victim Laura Thomas, was still at the apartment complex and spoke with Officer Miller."

Also included in the report was the following information by Officer F. Guedea, #145:

"On 03-27-04 at 0724 hours, I, Officer F. Guedea, #145, was dispatched to 1200 W. Taylor, apt. 340 in building #10. Myself, Sgt. Mullins, Officer Ferguson, and Officer Dawsey arrived at about 0726 hours.

"We went upstairs and approached apartment #340. Officer Ferguson was already inside, as well as Sgt. Mullins. I did not observe where Officer Dawsey was; however, I did step into the doorway and observed a white female subject lying on the floor nude and had large amounts of blood that appeared to be coming from the chest and upper torso area.

"Sgt. Mullins and the other officers had already cleared the apartment. Sgt. Mullins then had officers step out from the doorway, closed the door partially, and immediately started to cordon off the crime scene area. Sgt. Mullins gave us the area that he wanted cordoned off. Officer Dawsey had already cordoned off some of the area and I also cordoned off several areas behind the apartment building #10 as well as in the front lower level of the apartment.

"Other officers started arriving on the scene, as well as investigators. Myself and Officer Ferguson then started interviewing in the immediate building and buildings surrounding the crime scene. I went to building #4 and interviewed the residents which were at home.

D: 08-05-04/JB T: 08-06-04/cc Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 3 of 13

Core Form: ☐ Yes ☐ NoContinuation of MHRS 4-8
MHRS-cf

8525

01862

AT008522

Continuation Form

Dated: 08-05-04

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

"I first started at apartment #124 and made contact with Roberta K. Gray, WF, who stated that she had heard nothing at all, or anything unusual. I spoke with her at 0810 hours.

"I then went to apartment #224 and made contact with a couple, Melvin Cecil Bowen, BM, who stated that he had been asleep all night and heard nothing. I then spoke with his girlfriend, Danielle Minor, WF, who stated that she was up at about 0400 hours this morning; however, she heard nothing unusual in the apartment building across from her.

"I then knocked on apartment 123 at 0827 hours and made contact with Sandra Stewart, WF, who stated she had heard nothing at all, and stated she lives there with her brother, David Stewart.

"At 0829 hours I knocked on door 121 and made contact with Allen Valentine, WM. Allen stated that he sees large volumes of traffic going into the apartment #340 at all hours of the day. He stated that there is always a black male subject there, who appeared to live there but would be in and out quite often. He stated he did see a white female there who had a couple of small children, but he believes that there was drug activity taking place in that residence."

Officer Guedea also had the following narrative:

"On 03-27-04 at 10:55 hours, I, Officer F. Guedea, 145, arrived at 500 N. Highland. I arrived here to stand by with Officer Mark Miller, #114, who was watching the suspect, Andre Thomas, BM. Thomas was handcuffed to a hospital bed and was being monitored by medical staff who were coming in and out of the treatment room. The doctor in charge of treating Thomas at this time was Dr. Scott Choi.

"Nursing staff then told myself and Officer Miller that Thomas was going to have to get a CT done, at which time they did take him to the x-ray examining area as myself and Officer Miller followed. After the CT staff viewed the images, they stated that there appeared to be no deep penetration from the stab wounds that were self-inflicted by Thomas.

"Shortly after that, Thomas was transported back to the examination room in the ER. It was within a few minutes that the nursing staff started to call the doctor into the room and started working what appeared to be frantically on Thomas. Shortly after, a physician from Texoma Medical Surgery, who was a heart specialist named Dr. Wilcott, arrived at the ER. It was later learned that Thomas apparently may have caused a hole area in his heart and that the nursing staff stated he was losing blood. At one point one nurse said she had to give him blood.

"Soon after that, Thomas was prepped for surgery and he was then rushed upstairs to the operating room. Myself and Officer Miller did dress in the proper sterile attire and escorted Thomas into the operating room where we stood by as doctors worked on him.

01863

D: 08-05-04/TB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 4 of 13

Core Form: ☐ Yes ☐ No

Continuation of MHRS 4-8
MHRS-cf

8526

AT008523

Continuation Form

Dated: 08-05-04

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

Dr. Wilcott then opened Thomas' chest cavity up and examined the inside around the heart, and stated that there was some bleeding. However, I do not know the area that was bleeding.

"Afterwards, I was called by Sgt. Mullins to exit the operating room and clear the hospital due to the full call that we had at this time. I did clear the hospital room. Officer Miller remained with Thomas, who was sedated at this time and Officer Miller related to me that it would take Thomas six weeks to recover; however, he would be able to go home after about four days.

"As I was exiting the emergency room I was stopped by a nursing who was also attending Thomas. The nurse's name was Loava McCarthy. She is an RN in the ER. Loava related to me at 1527 hours that when Thomas first came in she asked how did he receive the stab wounds and he responded to her that he did them himself. She asked him why he stabbed himself and he stated that he wanted to die. She again asked him 'Why do you want to die' and Thomas told her 'Because I stabbed three people.'"

The True Bill of Indictment for Cause #51483 indicated that Andre Lee Thomas was indicted for having done the following:

"Count One: Intentionally or knowingly cause the death of an individual, namely Laura Christen Thomas, by stabbing or cutting her with a knife and did then and there intentionally or knowingly cause the death of another individual, namely [REDACTED] Boren, by stabbing or cutting him with a knife and both murders were committed during the same criminal transaction.

"County Two: Intentionally or knowingly cause the death of an individual, namely [REDACTED], but cutting or stabbing him with a knife and that the said [REDACTED] was then and there an individual younger than six years of age."

The competency to stand trial evaluation report by James R. Harrison, Ph.D., dated 04-15-04, indicated that Dr. Harrison had interviewed and observed the defendant on 04-05-04, 04-07-04, 04-12-04, and 04-14-04. Dr. Harrison indicated that he also had interview's with the defendant's attorney, R.J. Haygood; the assigned prosecutor, Kerry Ashmore; the Grayson County Chief Nurse, Natalie Sims; and the defendant's father, Danny Thomas. Dr. Harris also indicated that he reviewed the records of the Medical Staff at Grayson County Jail, including the interview notes of the jail psychologist, Dr. Ruben McGirk. Dr. Harris reviewed the day-by-day notes of Mr. Thomas' incarceration, including the patient reporting that he had cameras behind his eyelids and that others knew his thoughts. Dr. Harris indicated that on the fifth day of incarceration, Mr. Thomas plucked his right eye from the socket after reading the Bible verse Matthew 5:29. Dr. Harris indicated that previous recommendations for pharmacological treatment had been refused by both the defendant and his attorney. Dr. Harris indicated that after the defendant had enucleated his right eye, he was given antipsychotic medications in the form of Geodon, with doses up to 160 mg per day. Dr. Harris reported, "Mr. Thomas appeared to have responded quickly to the medicine in terms of his level of agitation but he continues to show delusional thinking and disorganization in his thought processes."

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 5 of 13

Core Form: ☐ Yes ☐ NoContinuation of MHRS 4-8
MHRS-cf

8527

01864

AT008524

Continuation Form

Dated: 08-05-04

THOMAS, ANDRE

656

BM

06-23-04

F07164

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

PROGRAM: SPRUCE

Dr. Harris reported that the defendant's thinking was impaired by psychotic process, with evidences of both grandiose and paranoid delusions, strong ideas of reference, and loose associations, tangentiality and derailment. Dr. Harris recommended that Mr. Thomas be found incompetent to stand trial. Dr. Harris diagnosed Mr. Thomas' condition as Schizophreniform Disorder; Rule Out Substance Induced Psychotic Disorder.

The evaluation for competency to stand trial by Peter Oropeza, Psy.D., indicated that Dr. Oropeza evaluated the defendant on 04-26-04, 04-28-04, and 05-07-04. Dr. Oropeza indicated that on the last day the inconsistent nature of his appearance and behavior, that the issue of finding or exaggerating symptoms of a mental illness was of "notable concern." Dr. Oropeza reported that the defendant appeared to have a rational understanding of the charges and the potential consequences, but that he had difficulty expressing his thoughts. Dr. Oropeza recommended that he be considered to be incompetent to stand trial, but thought that he could be evaluated for possible feigning or exaggerating symptoms at an inpatient facility.

The Transcript of the Hearing About Competency for Cause #51484 in the 15th District Court of Grayson County, Texas, on 06-16-04, indicated that the reports of Dr. Harrison and Dr. Oropeza were submitted into evidence.

The Amended Order of Criminal Commitment because of Incompetency for Cause #50391 in the 15th District Court of Grayson County, Texas, indicated that Mr. Thomas was found incompetent to stand trial and was committed to North Texas State Hospital - Vernon Maximum Security Unit for a period not to exceed 120 days for the purpose of restoration of competency to stand trial.

The Amended Order of Criminal Commitment Because of Incompetency for Cause #51483, indicates that Mr. Thomas has been found Incompetent to Stand Trial for another charge of Capital Murder.

When the patient was asked what events brought him to this facility, he responded, "They're trying to dope me up." The patient appeared to be lethargic or sedated. He stated that he had difficulty keeping his left eye open. He stated that he wanted to go to sleep. He frequently lowered his head and spoke in a low voice that was difficult to understand. He continued to lower his head and talk in inaudible volumes even after repeated requests for him to raise his head and to talk louder.

He stated that he had no desire to harm himself or to remove his left eye. He denied having a desire to harm others. He reported that he had "bad dreams of scorpions and tarantulas trying to eat me but I will not let them." He denied auditory and visual hallucinations at this time. He answered most questions with "I don't know". He then stated, "I've already told them" and then refused to provide further information.

PAST PSYCHIATRIC HISTORY:FAMILY PSYCHIATRIC HISTORY: Unknown.

NONPSYCHIATRIC MEDICAL HISTORY: When asked if the patient had medical problems, he responded, "I don't know"; however, I think that we can check and see that the patient had a self-inflicted

01865

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 6 of 13

Core Form: ☐ Yes ☐ No

Continuation of MHRS 4-8
MHRS-cf

8528

AT008525

Continuation Form

Dated: 08-05-04

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

stab wound of the chest 03-27-04, which required a thoracotomy and surgical repair. He had also had another stab wound of the chest a day or two earlier, which apparently did not penetrate the chest cavity.

He also enucleated his right eye on 04-02-04 and surgical repair of the injury was accomplished.

SUBSTANCE ABUSE HISTORY: The patient refused to provide information. The information provided by Dr. Harris and Dr. Oropeza indicated that the patient had substantially abused alcohol and marijuana and over-the-counter medications such as Coricidin. Statements in the police report indicate that prior to the events for which the patient was arrested, he had taken large quantities of over-the-counter cold medicine, possibly Coricidin, and used alcohol in significant quantities.

SOCIAL/LEGAL STATUS: The records of Dr. Harris and Dr. Oropeza indicated that the patient's father reported that he had been raised in a loving home and that he had done well early in life. The report indicated that he attended school through the ninth grade and then dropped out but later got a GED. The information reported that he worked for three years for the City of Sherman maintenance department but was fired about one year ago and has had only spotty employment since that time.

The patient's father reported that Andre Thomas had lived with Laura Thomas from age 16 years until he married her at age 18 years. They apparently had one child, [REDACTED] who was about five years old, who was murdered at the same time as his mother.

Statements from involved individuals in the police report indicated that the patient was living with another woman at the time of the events for which he was arrested.

The patient admitted that he had had multiple arrests as a juvenile, but he refused to provide further information.

The patient is presently committed to North Texas State Hospital - Vernon Maximum Security Unit pursuant to Article 46B.073 of the Code of Criminal Procedure after having been found incompetent to stand trial for the charge of Capital Murder, out of the 15th District Court of Grayson County, Texas.

HISTORY OF SUICIDAL IDEATION/ATTEMPT: Dr. Harris's report indicated that either the patient or his father reported that he had had many suicide attempts as a child or adolescent and had cut his wrist at age 10 and age 15.

MENTAL STATUS: The patient appeared to be a short, slender, 21 year old, black male, dressed in an orange jail jumpsuit. His right eyelid remained closed and his left eyelid was frequently closed during the interview. The patient frequently lowered his head and talked in essentially inaudible tones, even after multiple requests to raise his head and to talk louder. The rate of his speech was within normal limits. His hair was cut short and he had a few days growth of beard and mustache. He also had a midline thoracotomy scar as well as two stab wounds to the left of midline, all of which appeared to be well healed. His gait appeared to be normal as he entered and exited the interview. The patient was essentially uncooperative with the interview and after providing information, he finally stated, "I've already told them" and refused to provide additional information. He was oriented to name and place, but refused to cooperate with evaluations of orientation to date and legal situation. His thought processes appeared to be

01866

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 7 of 13

8529

Core Form: ☐ Yes ☐ No

Continuation of MHRS 4-8
MHRS-cf

AT008526

Continuation Form

Dated: 08-05-04

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

organized and goal directed. Although his recent history included indications of delusional thought processes, he gave no evidences of such at the time of this interview, but then he refused to disclose much information. He was uncooperative with evaluation of such things as hallucinatory behavior, his level of intellectual functioning, his memory, his abstract thinking, and his judgment and insight. However, his vocabulary suggested that his level of intellectual functioning was probably in the average or low average range. He denied suicidal or homicidal ideation. He denied wanting to enucleate his left eye. His judgment appeared to be poor. His insight appeared to be limited.

PRESUMPTIVE DIAGNOSES

Axis I: Substance-Induced Psychosis With Delusions 292.11
 Substance-Induced Psychosis With Hallucinations 292.12
 Polysubstance Dependence 304.80

Axis II: No Diagnosis V71.09

Axis III: Status-Post Enucleation of Right Eye
 Status-Post Surgical Repair of Injury Associated With Enucleation of Right Eye
 Status-Post Stab Wounds of Chest
 Status-Post Thoracotomy for Self-Inflicted Stab Wounds of Chest
 High Risk Medications V58.69

Axis IV: Psychosocial and Environmental Stressors:
 Problems with Primary Support Group
 Problems Related to the Social Environment
 Educational Problems
 Occupational Problems
 Problems Related to Interaction with the Legal System/Crime

Axis V: Global Assessment of Functioning

1. Psychiatric/Psychological Impairment Subscale - 30 - As evidenced by recent history of delusional thought processes, irritable and labile affect, impaired judgment and insight.
2. Social Skills Subscale - 30 - As evidenced by grossly inappropriate behaviors with virtually little understanding of feelings and needs of others or how to share with others.
3. Violence Subscale - 10 - As evidenced by history of charges for multiple homicides.
4. Activities of Daily Living - Occupational Skills Subscale - 30 - No job and apparent inability to independently maintain a home.
5. Substance Abuse Subscale - 20 - Functioning is extremely impaired by frequent use of drugs such as alcohol, marijuana, and others when not in a controlled environment.
6. Medical Impairment - 70 - Mild medical problems which may cause some difficulty in social or occupational functioning, including his need to take prescription medications on a daily basis and his need for periodic medical follow-up.
7. Ancillary Problems - 10 - As evidenced by charges for Violence.

Global Assessment of Functioning-Equivalent = (Subscales #1 + #2 + #3 + #4) ÷ 4 = 25
 Highest GAF in past year = Unknown

SIGNIFICANT PHYSICAL FINDINGS: The patient's medical history was positive for his past use of alcohol, marijuana, over-the-counter medications and others. The patient had a history of self-inflicted stab wounds to the chest with

D: 08-05-04/JB T: 08-06-04/ce Steno
 R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
 Chief Psychiatrist, Comp. Prog. 186-7

Page 8 of 13

E530

Core Form: ☐ Yes ☐ NoContinuation of MHRS 4-8
MHRS-cf

AT008527

Continuation Form

THOMAS, ANDRE

656

Dated: 08-05-04

BM

06-23-04

F07164

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

PROGRAM: SPRUCE

thoracotomy for repair on or about the day of his arrest. On or about 04-02-04 the patient experienced self-inflicted enucleation of his right eye.

On physical exam the patient's height was 67", weight 141 lbs., temperature 97.8, pulse 80, respirations 18, and blood pressure 118/70. The patient was found to be status-post self-inflicted stab wound to the chest with surgical repair, self-inflicted enucleation of the right eye and acne of the back. The patient also had a past history of hypertension.

During this hospitalization, the following laboratory studies were accomplished: On 06-24-04 the patient's CBC was essentially within normal limits. His TSH was 1.50, within normal limits. His comprehensive metabolic survey was essentially within normal limits except for an AST of 48 and ALT of 66. Serum lipid panel was within normal limits. His ESR was 1. RPR was nonreactive. Serum Valproate was 21.0. His urinalysis was normal. His serum Amylase was 119. On 06-28-04 the serum Valproate was 68.3. The acute Hepatitis profile was negative.

On 07-05-04 his hepatic function panel showed AST of 95 and ALT of 111. His serum Valproate was 12.0 and the Depakote had been discontinued. On 07-05-04 the HIV (CPL) was nonreactive.

On 07-19-04 the serum Amylase was 126. Hepatic function panel showed AST of 100, ALT of 217. His CBC was essentially within normal limits.

On 07-26-04 the ALT was 108, Serum cholesterol was 177, triglycerides 30.

On 08-02-04 the hepatic function panel showed an AST of 36 (within normal limits), ALT of 64 with normal limits of 10 to 60 units per liter.

His electrocardiogram of 06-23-04 showed early repolarization with ST changes, nonspecific STT changes in some leads, but normal electrocardiogram otherwise, with a heart rate of 70 beats per minute.

During this hospitalization the patient presented to sick call on the following dates, with the following problems:

On 07-05-04 for treatment of acne. He was treated with Benzoyl Peroxide-Gel 5% qhs for one month. He was also given an eye patch to cover his right eye socket.

COURSE AND PROGRESS: At the time of his admission to this facility Mr. Thomas reported delusional thought processes, irritable and labile affect, and impaired judgment and insight. Since the patient refused to give consent for treatment with psychoactive medications, a First Level Clinical Review was requested for treatment of the patient with antipsychotics, mood stabilizers, and anxiolytics as appropriate.

Since the patient had a recent history of self-harm he was placed on Category I precautions to attempt to prevent self-harm, and mittens on his hands to attempt to prevent self-mutilation.

Since the patient had been taking Depakote prior to admission, he was placed on a Depakote protocol. After a First Level Clinical Review was obtained he was placed on Depakote 500 mg po bid pc for target symptoms of mood swings, poor impulse control and agitation. He was also begun on Zyprexa 20 mg po q1800 hours for target symptoms of delusions, bizarre ideation, labile affect, and agitation.

01868

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 9 of 13

8531

Core Form: ☐ Yes ☐ NoContinuation of MHRS 4-8
MHRS-cf

AT008528

Continuation Form

THOMAS, ANDRE

656

Dated: 08-05-04

BM

06-23-04

F07164

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

PROGRAM: SPRUCE

The Category I precautions and the mittens were continued throughout this hospitalization in an attempt to prevent self-harm and self-mutilation.

On 06-30-04 the Zyprexa was increased to 30 mg po q1800 hrs, after the patient continued to verbalize bizarre ideation and delusional thought processes.

On 07-07-04 a consultation was submitted to Eli Anderson, M.D., regarding proposed treatment with Zyprexa 40 mg qd after the patient reported persistent auditory hallucinations. Upon receipt of the consultation, the Zyprexa was increased to 40 mg po q1800 hrs for target symptoms of hallucinations and bizarre ideation.

With the increased medication, the patient showed improvement in his cognitive abilities and an apparent remission of his delusions and a pronounced decrease in the auditory hallucinations reported by the patient.

Mr. Thomas was able to take and pass his oral competency evaluation on 07-22-04. (Please see the competency evaluation report by B. Thomas Gray, Ph.D., Clinical Psychologist III, dated 07-22-04).

Upon my receipt of Dr. Gray's report, I notified the committing court that Mr. Thomas had apparently gained competency to stand trial.

The committing court subsequently made arrangements for Mr. Thomas to be discharged from this facility on 08-09-04, to return to the committing court for further consideration of his case.

CONDITION OF PATIENT AT DISCHARGE:

Commitment Status: RESTORATION NOT TO EXCEED 120 DAYS

DISCHARGE DIAGNOSIS

Axis I: Substance-Induced Psychosis With Delusions 292.11
Substance-Induced Psychosis With Hallucinations 292.12

Polysubstance Dependence 304.80
Malingering V65.2

Axis II: No Diagnosis V71.09

Axis III: Status-Post Enucleation of Right Eye
Status-Post Surgical Repair of Injury Associated With Enucleation of Right Eye
Status-Post Stab Wounds of Chest
Status-Post Thoracotomy for self-inflicted Stab Wounds of Chest
High Risk Medications V58.69

Axis IV: Psychosocial and Environmental Stressors:
Problems with Primary Support Group
Problems Related to the Social Environment
Educational Problems
Occupational Problems
Problems Related to Interaction with the Legal System/Crime

01869

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 10 of 13

Core Form: ☐ Yes ☐ NoContinuation of MHRS 4-8
MHRS-cf

8532

AT008529

Continuation Form

THOMAS, ANDRE

656

Dated: 08-05-04

BM

06-23-04

F07164

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

PROGRAM: SPRUCE

Axis V: Global Assessment of Functioning

1. Psychiatric/Psychological Impairment Subscale 60 Moderate symptoms as evidenced by improved cognitive functioning. Evaluation of psychotic symptoms is obscured by malingering symptoms of mental illness, which may be motivated by a desire to avoid prosecution.
2. Social Skills Subscale 70 Some difficulty with social skills as evidenced by insensitivity to the feelings and needs of others.
3. Violence Subscale 50 Serious problems with potential for self-harm.
4. Activities of Daily Living Occupational Skills Subscale 60 Moderate problems as evidenced by little history of educational or occupational attainment.
5. Substance Abuse Subscale 20 Functioning is extremely impaired by frequent use of drugs such as alcohol, marijuana, and others when not in a controlled environment.
6. Medical Impairment 70 Mild medical problems which may cause some difficulty in social or occupational functioning, including his need to take prescription medications on a daily basis and his need for periodic medical follow-up.
7. Ancillary Problems 10 As evidenced by having been found incompetent to stand trial.

Admission GAF: 25

Discharge GAF: 60

DISCHARGE MEDICATIONS:

Discharging with 14 day supply of:

1. Zyprexa 40 mg po q 1800 hr
2. Cleanses right eye orbit with cotton ball soaked in NS qid, then 4 drops of artificial tears to right eye orbit area qid

Also sending 1-eye patch at discharge.

Condition at Discharge: Improved

This adult male is discharging to the care and custody of the Grayson County Sheriff's Department to return to the 15th Judicial District Court of Grayson County, Texas at 200 S. Crockett Street, Sherman, Texas 75090, 903-813-4303, for disposition of the charges pending of Capital Murder.

Andre is returning to the committing court with our recommendation he is competent to stand trial. He has demonstrated all areas of trial competency. He has been on a Category I, one to one, observation for prevention of self harm throughout his stay with mittens ordered to be worn on both hands. Patient only allowed to remove mittens to bathe with staff observing and only one removed to eat meals or bathroom needs. The patient had reportedly plucked out his right eye during incarceration at the Grayson County Jail. He has been cooperative with staff. Due to the special precaution, the patient has not been enrolled in groups off the unit. He has attended on unit groups with little input. He was able to pass a written competency test without difficulty. He has not displayed bizarre or unusual behaviors. Andre has made hyper-religious statements throughout his stay. The patient is currently stable on the prescribed psychotropic medications and has been compliant. The patient has support from his father, Danny Thomas. The extent, however unclear. Andre has had several visitors consisting of friends from Sherman, his mother, and brother, James.

01870

D: 08-05-04/IB T: 08-06-04/cc Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 11 of 13

8533

Core Form: ☐ Yes ☐ No

Continuation of MHRS 4-8
MHRS-cf

AT008530

Continuation Form

THOMAS, ANDRE

656

Dated: 08-05-04

BM

06-23-04

F07164

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

PROGRAM: SPRUCE

Allergies: Claritan

Diet: Regular

Weight: 159

Activity Level: Ad Lib

FOLLOW UP

Coordination with MHA: Yes

Medical Follow Up Needs:

1. Aims testing q 3 months due: 9-23-04.
2. Routine lab work since patient is maintained on psychoactive meds to include SMA-20 and CBC.
3. Olanzapine Protocol:
 - A. Cholesterol, Triglycerides, SGPT at 3 months due: 10-25-04, at 6 months due: 1-25-04, then every 6 months due: 7-26-05.
 - B. FBS q 3 months due 10-25-04, 1-25-05.
 - C. Notify physician if symptoms of hyperphagia, polydipsia or polyuria develop.
 - D. Weigh monthly and notify physician if weight 10% or more over baseline.
 - E. Discontinue protocol on any of above medications when medication has been discontinued.
4. LFTS due: 8-16-04.
5. May use eye patch, will send one at discharge.
6. County was notified that patient will need mitts when discharged due to self harm.

Other Follow Up Needs:

Aftercare services will be provided by the Grayson County Mental Health Center at 101 E. Jones, Sherman, Texas 75090, 903-893-0175, with Cynthia Fulbright at 903-893-0175 being the aftercare coordinator. She has been notified of the patient's pending discharge and informed a copy of discharge information will be faxed to her upon completion.

INTERVENTIONS/OBJECTIVES:

1. Contact with jail liaison to ensure competency status.
2. Contact with jail liaison and MHA to ensure medication compliance.
3. Referral to case manager for substance abuse counseling.
4. Referral to case manager to address suicidal/homicidal ideation.
5. Referral to case manager to assist in applying for SSI/SSDI.
6. Referral to case manager for assistance in living needs.
7. Referral to case manager for assistance in seeking employment.
8. Referral to case manager to teach more effective coping skills.
9. Referral to case manager to ascertain the amount of familial support.
10. Contact with court appointed attorney of record: R.J. Hagood, 2301 S. Austin Hwy, 75 South, Denison, Texas 75020, 903-465-0501
11. Contact with father, Danny Thomas of 2424 Texoma Parkway, Crossroads Apt. #15, Sherman, Texas 75090, 903-813-4040.

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

01871

Page 12 of 13

Core Form: ☐ Yes ☐ No

Continuation of MHRS 4-8
MHRS-cf

8534

AT008531

Continuation Form

Dated: 08-05-04

To be completed whenever a standard MHRS form does not provide adequate space for the required data.

THOMAS, ANDRE

656

BM

06-23-04

F07164

PROGRAM: SPRUCE

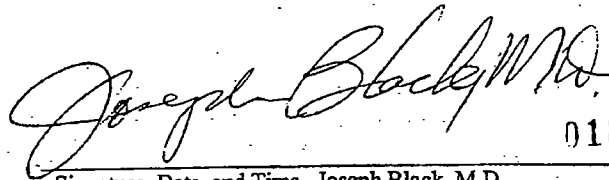
Destination at Discharge: Jail/Other Correctional Facility

Disposition of Private Medications: Return All

Medications Returned: Any medication received with patient at admissions will be returned with the patient at discharge.

TIMA Algorithm: BD-M/MX

Stage at Discharge: 1



01872

D: 08-05-04/JB T: 08-06-04/ce Steno
R: 008-05-04 @ 11:20 AM by hand

Signature, Date, and Time Joseph Black, M.D.
Chief Psychiatrist, Comp. Prog.

Page 13 of 13

8535

Core Form: ☐ Yes ☐ NoContinuation of MHRS 4-8
MHRS-cf

AT008532

Exhibit 164

**Prescription for Andre
Thomas for Zyprexa for 20
mg**

WAYNE BELL, M.D.
GRAYSON EMERGENCY SPECIALISTS
200 SOUTH CROCKETT
SHERMAN, TX 75090
(903) 813-4406

NAME Thomas, Andie AGE 21
ADDRESS 260 S. Crockett DATE 8-18-04

Rx ILLEGAL IF NOT SAFETY BLUE BACKGROUND

R Zyprexa 20mg #60
TI-PO QHS

Refill 3 times
☐ Label

[Signature]
Signature

A generically equivalent drug product may be dispensed unless the practitioner has written the words "Brand Necessary" or "Brand Medically Necessary" on the prescription.

4CGP1424461